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2005

Application No.: 10/065,212
 Amendment dated February 07, 2005
 Amendment made in response to Office Action dated November 10, 2004

FEB 06 2005

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No.	: 10/065,212	Confirmation No.	: 8176
Applicant	: Raj Kuman <u>JAIN</u>		
Filed	: September 26, 2002		
TC / A.U.	: 2818		
Examiner	: Thong Quoc <u>LE</u>		
Docket No.	: 2000P19188US		
Customer No.	: 031366	Date	: February 07, 2005
Title	: Multi-Port Memory Cells		

CERTIFICATE OF TRANSMISSION
 I hereby certify that this correspondence is being facsimile
 transmitted to the United States Patent and Trademark Office,
 Alexandria, VA 22313-1450 on February 07, 2005.


Andrea WON

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 P.O. BOX 1450
 ALEXANDRIA, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action mailed on November 10, 2004, please amend the above-identified application as follows:

- a) Amendments to the Drawings begin on page 2 of this paper and include both attached replacement sheet and annotated sheet showing changes;
- b) Amendments to the Claims are reflected in the listing of claims which begins on page 4 of this paper; and
- c) Remarks/Arguments begin on page 10 of this paper.

02/17/2005 TDAWKINS 09988003 592388 10065212

01 FC:1202 250.00 DA

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PAGE 5/21 * RCV'D AT 2/6/2005 9:46:58 PM [Eastern Standard Time] * SVR:USPTO-EFXRF-10 * DNS:8729318 * CSID:+65 6746 8263 * DURATION (mm:ss):07:00
 02 FC:1201 200.00 DA

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array with at least first and second access ports. As for 13 and 17, they have been amended to more clearly recite a memory array having memory cells with at least first and second ports to form a memory array with first and second access ports. Likewise, newly added claim 20 recites a memory array having memory cells with at least first and second ports to form a memory array with first and second access ports. Therefore, Applicant submits that claims 1, 13, 17 and 20 are patentable over Taylor. Since claims 2-12, 14-16, 18-19 and 21-25 are directly or indirectly dependent on claims 1, 13, 17 or 20, these claims are also patentable over Taylor.

Conclusion

In view of the foregoing, it is respectfully submitted that this application is in condition for allowance and the issuance of a formal Notice of Allowance at an early date is respectfully requested. Should the Examiner believe that a telephone conference would expedite prosecution of this application, please telephone the undersigned attorney at his number set out below.

Date: February 07, 2005

Respectfully submitted,



Dexter Chin
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PTO/SB/17 (12-04v2)

Approved for use through 07/31/2008. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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Fee pursuant to the Consolidated Appropriations Act, 2005 (PL. 481).

Effective on 12/09/2004.

FEE TRANSMITTAL For FY 2005

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

460

Complete if Known

Application Number	10/065.212
Filing Date	September 26, 2002
First Named Inventor	Raj Kumar JAIN
Examiner Name	Thong Quoc LE
Art Unit	2818
Attorney Docket No.	2000P19188US

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number 50-2388 Deposit Account Name Horizon IP Pte Ltd

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Small Entity	
			Fee (\$)	Fee (\$)
25	5	50	50	25
HP = Highest number of total claims paid for, if greater than 20.			200	100
			360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
25 - 20 or HP = 5	x 50 = 250					

HP = Highest number of total claims paid for, if greater than 20.

Independent Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
4	1	200	200

HP = Highest number of independent claims paid for, if greater than 3.

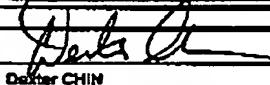
3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(a).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
100	0	(round up to a whole number)	x	=

4. OTHER FEE(S)	Fee Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge):	

SUBMITTED BY:

Signature		Registration No. (Attorney/Agent)	38,842	Telephone	+65 9838 8908
Name (Print/Type)	Dexter CHIN			Date	February 07, 2005

This collection of information is required by 37 CFR 1.128. The information is required to obtain or retain a benefit by the public which is to be (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PATENT APPLICATION FEE DETERMINATION RECORD
Substitute for Form PTO-875

Application or Docket Number
10065212

CLAIMS AS FILED - PART I

(Column 1)	(Column 2)
FOR	NUMBER FILED
BASIC FEE (37 CFR 1.16(a))	
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =
MULTIPLE DEPENDENT CLAIM PRESENT	(37 CFR 1.16(d))

SMALL ENTITY

RATE	FEES
	\$ _____
X \$ _____	=
X \$ _____	=
+ \$ _____	=
TOTAL	

OR

OTHER THAN SMALL ENTITY

RATE	FEES
	\$ _____
X \$ _____	=
X \$ _____	=
X \$ _____	=
+ \$ _____	=
TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2.

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	2/6/05	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR
Total (37 CFR 1.16(c))	25	Minus	" 20 = 5
Independent (37 CFR 1.16(b))	4	Minus	*** 3 = 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

SMALL ENTITY

RATE	ADDITIONAL FEE
X \$ _____	=
X \$ _____	=
+ \$ _____	=
TOTAL ADD'L FEE	

OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X \$ 50	= 250
X \$ 200	= 200
+ \$ _____	=
TOTAL ADD'L FEE	450

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR
Total (37 CFR 1.16(c))		Minus	" " =
Independent (37 CFR 1.16(b))		Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDITIONAL FEE
X \$ _____	=
X \$ _____	=
+ \$ _____	=
TOTAL ADD'L FEE	

OR

RATE	ADDITIONAL FEE
X \$ _____	=
X \$ _____	=
+ \$ _____	=
TOTAL ADD'L FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR
Total (37 CFR 1.16(c))		Minus	" " =
Independent (37 CFR 1.16(b))		Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDITIONAL FEE
X \$ _____	=
X \$ _____	=
+ \$ _____	=
TOTAL ADD'L FEE	

OR

RATE	ADDITIONAL FEE
X \$ _____	=
X \$ _____	=
+ \$ _____	=
TOTAL ADD'L FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.